

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/586,895

FILING DATE

7-20-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			e			
2						
3						
4						
5						
6						
7						
8						
9			e			
10			1			
11				1		
12				1		
13				1		
14			1			
15				1 -		
16				1 -		
17				1 -		
18				1 -		
19				1 -		
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48						
49						
50						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		←	9	←		←
TOTAL CLAIMS			11			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						